

**Joint Call: Science and Technology Cooperation –** **SINO-MALTA Fund 2022**

**Stage 1 Pre-Proposal Application Form**

Version: 1

Issue Date: May 2022

**Notes to Applicants.**

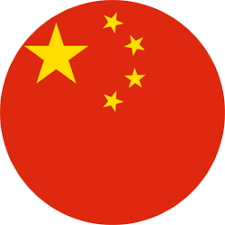
1. The official National Rules for Participation can be downloaded from the [MCST’s website](http://mcst.gov.mt/science-technology-cooperation-sino-malta-fund/). Kindly ensure that this application form is filled in with reference to the National Rules for Participation 2022 for this scheme.
2. The Application Form and any attached documents will be treated as confidential throughout and after the project appraisal process.
3. Only Application Forms which are complete and that include all relevant supporting documents will be evaluated.
4. Only electronically filled in application forms will be accepted. Should the application be hand-written or should the format of the application form be altered, the application form will not be evaluated.
5. All responses must be clearly explained and substantiated.
6. A complete Application Form must be submitted by the **Lead Applicant** of the **Malta-based entity** (on behalf of the Project Consortium) to the Council via email on [international.mcst@gov.mt](mailto:international.mcst@gov.mt). Corresponding Annexes may be sent by the **Project Partners** directly to the Council via email.
7. Deadline for submissionis **30th June 2022 at 23:59 CET.** Any submissions received after this date and time will be rejected.
8. This Application will be evaluated in accordance with the National Rules for Participation 2022. The Council reserves the right to request further information should this be required.
9. Please complete the sections **for all partners** involved in the project from different countries, including the partner(s) not requesting funding, if any.

**1. Applicant Details**

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**MALTESE LEAD APPLICANT**

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| --- | --- |
| **Legal Name of Undertaking / Entity** | Click or tap here to enter text. |
| **Name of Department/Institute/Centre** (if applicable) | Click or tap here to enter text. |
| **E-mail address:** | Click or tap here to enter text. |
| **Website address:** | Click or tap here to enter text. |
| **VAT number** (not applicable for public entities)**:** | Click or tap here to enter text. |
| **Legal Form of Undertaking / Entity:** | Choose an item. |
| **Registration/Identification number** (not applicable for public entities)**:** | Click or tap here to enter text. |
| **Entity / Undertaking Size:** | Choose an item. |
| **Date Established (not applicable for public entities):** | Click or tap to enter a date. |
| **Business Activity** (please state NACE code):  A list of NACE Codes may be accessed by [clicking here](https://ec.europa.eu/eurostat/documents/3859598/5902521/KS-RA-07-015-EN.PDF). | Click or tap here to enter text. |
| **Project Contact Point Information** | *Name:* Click or tap here to enter text.  *Designation:*Click or tap here to enter text.  *Contact Number:*Click or tap here to enter text.  *E-mail address:*Click or tap here to enter text. |
| **Funding route chosen**  Please tick which State Aid Regulation you will be following.  Applicants may only opt for **one** option. Selecting more than one option will render the application ineligible.  More information is provided in the National Rules for Participation and the Council can also be contacted for further clarifications. | Regulation A (*de Minimis*) (Applicants shall need to fill in Annex I)  Regulation B (GBER) (Applicants shall need to fill in Annex II)  State Aid not applicable (Applicants shall need to sign the declaration provided in either Annex III or Annex IV of this application form)  NB: The funding route selected will determine the aid intensity requested in the budget details as submitted at Stage 2 of this scheme, also taking into account eligible costs as outlined in the National Rules for Participation. |
| **Entity profile relevant to the project proposal (max 100 words)** | |
| Click or tap here to enter text. | |
| **Names of Key Researchers + brief biography** | |
| Click or tap here to enter text. | |

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**CHINESE LEAD APPLICANT**

**NB: Chinese entities must apply separately with the Ministry of Science and Technology (MOST)**

|  |  |
| --- | --- |
| **Legal Name of Undertaking / Entity** | Click or tap here to enter text. |
| **Name of Department/Institute/Centre** (if applicable) | Click or tap here to enter text. |
| **Legal Form of Undertaking / Entity** | Choose an item. |
| **Website address:** | Click or tap here to enter text. |
| **Project Contact Point Information** | *Name:* Click or tap here to enter text.  *Designation:*Click or tap here to enter text.  *Contact Number:*Click or tap here to enter text.  *E-mail address:*Click or tap here to enter text. |
| **Entity profile relevant to the project proposal (max 100 words)** | |
| Click or tap here to enter text. | |
| **Names of Key Researchers + brief biography** | |
| Click or tap here to enter text. | |

**2. Other Partner Profiles**

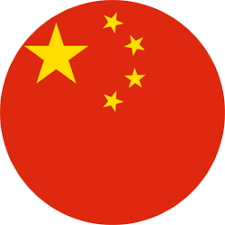
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**OTHER PARTNERS BASED IN MALTA**

*Two entries have been included. Should more than two Malta-based entities will be participating in the project, please contact the Council to include further entries in the application form.*

|  |  |
| --- | --- |
| **PARTNER 1** | |
| **Legal Name of Undertaking / Entity** | Click or tap here to enter text. |
| **Name of Department/Institute/Centre** (if applicable) | Click or tap here to enter text. |
| **E-mail address:** | Click or tap here to enter text. |
| **Website address:** | Click or tap here to enter text. |
| **VAT number** (not applicable for public entities)**:** | Click or tap here to enter text. |
| **Legal Form of Undertaking / Entity:** | Choose an item. |
| **Registration/Identification number** (not applicable for public entities)**:** | Click or tap here to enter text. |
| **Entity / Undertaking Size:** | Choose an item. |
| **Date Established (not applicable for public entities):** | Click or tap to enter a date. |
| **Business Activity** (please state NACE code):  A list of NACE Codes may be accessed by [clicking here](https://ec.europa.eu/eurostat/documents/3859598/5902521/KS-RA-07-015-EN.PDF). | Click or tap here to enter text. |
| **Project Contact Point Information** | *Name:* Click or tap here to enter text.  *Designation:*Click or tap here to enter text.  *Contact Number:*Click or tap here to enter text.  *E-mail address:*Click or tap here to enter text. |
| **Funding route chosen**  Please tick which State Aid Regulation you will be following.  Applicants may only opt for **one** option. Selecting more than one option will render the application ineligible.  More information is provided in the National Rules for Participation and the Council can also be contacted for further clarifications. | Regulation A (*de Minimis*) (Applicants shall need to fill in Annex I)  Regulation B (GBER) (Applicants shall need to fill in Annex II)  State Aid not applicable (Applicants shall need to sign the declaration provided in either Annex III or Annex IV of this application form)  NB: The funding route selected will determine the aid intensity requested in the budget details as submitted at Stage 2 of this scheme, also taking into account eligible costs as outlined in the National Rules for Participation. |
| **Entity profile relevant to the project proposal (max 100 words)** | |
| Click or tap here to enter text. | |
| **Names of Key Researchers + brief biography** | |
| Click or tap here to enter text. | |

|  |  |
| --- | --- |
| **PARTNER 2** | |
| **Legal Name of Undertaking / Entity** | Click or tap here to enter text. |
| **Name of Department/Institute/Centre** (if applicable) | Click or tap here to enter text. |
| **E-mail address:** | Click or tap here to enter text. |
| **Website address:** | Click or tap here to enter text. |
| **VAT number** (not applicable for public entities)**:** | Click or tap here to enter text. |
| **Legal Form of Undertaking / Entity:** | Choose an item. |
| **Registration/Identification number** (not applicable for public entities)**:** | Click or tap here to enter text. |
| **Entity / Undertaking Size:** | Choose an item. |
| **Date Established (not applicable for public entities):** | Click or tap to enter a date. |
| **Business Activity** (please state NACE code):  A list of NACE Codes may be accessed by [clicking here](https://ec.europa.eu/eurostat/documents/3859598/5902521/KS-RA-07-015-EN.PDF). | Click or tap here to enter text. |
| **Project Contact Point Information** | *Name:* Click or tap here to enter text.  *Designation:*Click or tap here to enter text.  *Contact Number:*Click or tap here to enter text.  *E-mail address:*Click or tap here to enter text. |
| **Funding route chosen**  Please tick which State Aid Regulation you will be following.  Applicants may only opt for **one** option. Selecting more than one option will render the application ineligible.  More information is provided in the National Rules for Participation and the Council can also be contacted for further clarifications. | Regulation A (*de Minimis*) (Applicants shall need to fill in Annex I)  Regulation B (GBER) (Applicants shall need to fill in Annex II)  State Aid not applicable (Applicants shall need to sign the declaration provided in either Annex III or Annex IV of this application form)  NB: The funding route selected will determine the aid intensity requested in the budget details as submitted at Stage 2 of this scheme, also taking into account eligible costs as outlined in the National Rules for Participation. |
| **Entity profile relevant to the project proposal (max 100 words)** | |
| Click or tap here to enter text. | |
| **Names of Key Researchers + brief biography** | |
| Click or tap here to enter text. | |

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**OTHER CHINESE PARTNER DETAILS**

*Two entries have been included. Should more than two China-based entities will be participating in the project, please contact the Council to include further entries in the application form.*

**China**

|  |  |
| --- | --- |
| **PARTNER 1** | |
| **Legal Name of Undertaking / Entity** | Click or tap here to enter text. |
| **Name of Department/Institute/Centre** (if applicable) | Click or tap here to enter text. |
| **Legal Form of Undertaking / Entity** | Choose an item. |
| **Website address:** | Click or tap here to enter text. |
| **Project Contact Point Information** | *Name:* Click or tap here to enter text.  *Designation:*Click or tap here to enter text.  *Contact Number:*Click or tap here to enter text.  *E-mail address:*Click or tap here to enter text. |
| **Entity profile relevant to the project proposal (max 100 words)** | |
| Click or tap here to enter text. | |
| **Names of Key Researchers + brief biography** | |
| Click or tap here to enter text. | |

|  |  |
| --- | --- |
| **PARTNER 2** | |
| **Legal Name of Undertaking / Entity** | Click or tap here to enter text. |
| **Name of Department/Institute/Centre** (if applicable) | Click or tap here to enter text. |
| **Legal Form of Undertaking / Entity** | Choose an item. |
| **Website address:** | Click or tap here to enter text. |
| **Project Contact Point Information** | *Name:* Click or tap here to enter text.  *Designation:*Click or tap here to enter text.  *Contact Number:*Click or tap here to enter text.  *E-mail address:*Click or tap here to enter text. |
| **Entity profile relevant to the project proposal (max 100 words)** | |
| Click or tap here to enter text. | |
| **Names of Key Researchers + brief biography** | |
| Click or tap here to enter text. | |

**3. Project Details**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Project Acronym** | | | | | | | | |
| Click or tap here to enter text. | | | | | | | | |
| **Project Title** | | | | | | | | |
| Click or tap here to enter text. | | | | | | | | |
| **Thematic Area:** | | | | | Choose an item. | | | |
| **Start of Works:** | | | | | I confirm that Start of Works will commence after Grant Agreement signature | | | |
| **Project Duration:** (in months)*(Up to 24 months)* | | | | | Click or tap here to enter text. | | | |
| **Type of Research undertaken by beneficiary in the proposal** *(This should be classified as per the definitions of either ‘Fundamental Research’, ‘Industrial Research’ and/or ‘Experimental Development’ as per Section 1.3 of the National Rules for Participation. Please note that these classifications need to correspond to the activities that you will be undertaking. Such activities could be of mixed research type and might not necessarily be of the same research type as activities undertaken by other partners in the consortium. A clear and thorough justification shall need to be provided.)* | | | | | Choose an item.  Click or tap here to enter text. | | | |
| **Project Abstract** *(max 100 words)* | | | | | | | | |
| Click or tap here to enter text. | | | | | | | | |
| **Keywords:** | | | | | | | | |
| Click or tap here to enter text. | | | | | | | | |
| **Objectives and Targets of Project** *(Please provide a clear overview of the project objectives and targets, with reference to the idea, whilst considering the Scheme’s aim as described in section 1.1 of the National Rules for Participation (maximum number of words:500)* | | | | | | | | |
| Click or tap here to enter text. | | | | | | | | |
| **Research Methodology and Excellence** (*Please provide a brief, yet well-articulated description of the research methodology to be undertaken and how the project has the potential of going beyond current state-of-the-art. Also, provide details on the scientific relevance of the project and its alignment to the thematic area selected (maximum number of words:500)* | | | | | | | | |
| Click or tap here to enter text. | | | | | | | | |
| **Foreseen Timelines and Commercial Synergies** (*Please provide details on the foreseen project timelines. If applicable, provide foreseen commercial synergies and details on expected commercial impact (up to a maximum of 24-month duration) (maximum number of words:500)* | | | | | | | | |
| Click or tap here to enter text. | | | | | | | | |
| **Strength of the Partnership and Benefits of Proposed Scientific Collaboration**  *Please provide:*   * *information on the aim of the partnership and the proposed scientific collaboration whilst considering the Scheme’s aim as described in section 1 of the National Rules for Participation* * *a brief description of the roles of each of the Maltese and Chinese Principal Investigators* * *information on any other Maltese partners that will be part of the consortium* * *information on the expertise and value each entity brings to the consortium (including additional partners)* * *a description of the reciprocal benefits that the Maltese partner/s expect/s to obtain from the collaboration with the Chinese counterpart/s. Include an outline of the Chinese participant/s chosen and why.*   *(maximum number of words:500)* | | | | | | | | |
| Click or tap here to enter text. | | | | | | | | |
| **Financial Projections** | | | | | | | | |
| **Partner Number[[1]](#footnote-1)** | **Country** | **Full Name of Partner Organization** | **Partner Status (Lead / Partner)** | | **Project Cost[[2]](#footnote-2)** | **Requested Cost[[3]](#footnote-3)** |
| **1** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | | Click or tap here to enter text. | Click or tap here to enter text. |
| **2** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | | Click or tap here to enter text. | Click or tap here to enter text. |
| **3** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | | Click or tap here to enter text. | Click or tap here to enter text. |
| **4** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | | Click or tap here to enter text. | Click or tap here to enter text. |
| **5** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | | Click or tap here to enter text. | Click or tap here to enter text. |
| **6** | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | | Click or tap here to enter text. | Click or tap here to enter text. |
|  | **Total** | | | | Click or tap here to enter text. | Click or tap here to enter text. |

**4. DECLARATIONS**

4.1 Personal Data Protection

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| --- | --- |
|  |  |
| A. | Contact email address of the Data Protection Officer: dpo.mcst@gov.mt |
| B. | The legal basis and purpose of processing:  The personal data collected by the Malta Council for Science and Technology (hereinafter ‘the Council) through all documentation submitted, and its subsequent processing by the Council to evaluate data subject’s request for aid under the Scheme is in line with:   1. The relevant National Rules for Participation of this Call; 2. Commission Regulation (EU) No 651/2014 of 17th June 2014 declaring certain categories of aid compatible with the internal market in application of Articles 107 and 108 of the Treaty, as amended by Commission Regulation (EU) No 2017/1084 of 14 June 2017 amending Regulation (EU) No 651/2014 as regards aid for port and airport infrastructure, notification thresholds for aid for culture and heritage conservation and aid for sport and multifunctional recreational infrastructures, and regional operating aid schemes for outermost regions and amending Regulation (EU) No 702/2014 as regards the calculation of eligible costs, by Commission Regulation (EU) 2020/972 of 2 July 2020 amending Regulation (EU) No 1407/2013 as regards its prolongation and amending Regulation (EU) No 651/2014 as regards its prolongation and relevant adjustments, and by Commission Regulation (EU) 2021/1237 of 23 July 2021 amending Regulation (EU) No 651/2014 declaring certain categories of aid compatible with the internal market in application of Articles 107 and 108 of the Treaty, and as may be subsequently amended, (hereinafter referred to as the ‘General Block Exemption Regulation’), in the case of those projects submitted under Regulation B of the National Rules for Participation – State aid. 3. COMMISSION REGULATION (EU) No 1407/2013 of 18 December 2013 on the application of Articles 107 and 108 of the Treaty on the Functioning of the European Union to *de minimis* aid (*de minimis* Regulation), as amended by Commission Regulation (EU) 2020/972 of 2 July 2020, amending Regulation (EU) No 1407/203 as regards its prolongation and amending Regulation (EU) No 651/2014 as regards its prolongation and relevant adjustments, in the case of those projects submitted under Regulation A of the National Rules for Participation – State aid. 4. Data Protection Act, Chapter 586 of the Laws of Malta and Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data and repealing Directive 95/46/EC (General Data Protection Regulation). 5. The legitimate basis to process personal data submitted by the data subject by virtue of his/her written application for aid is Regulation 6 (1)(b) of the General Data Protection Regulation (“GDPR”), as ‘*processing is necessary in order to take steps at the request of the data subject prior to entering into a contract’*. |
| C. | Data retention period:  The data collected by the Council as submitted by the data subject via this application for aid will be retained for a period of ten (10) years from the last aid granted to the Entity represented by the data subject in relation to this written application for aid, in line with the Scheme National Rules for Participation and Article 12 of the General Block Exemption Regulation or Article 6 of the *de minimis* Regulation. In the case of projects which are not awarded, data collected by the Council as submitted by the data subject, shall need to be retained for the duration of the funding programme or of the programming period. |
| D. | 1. Pursuant to the General Data Protection Regulation, you have the right to access the personal data, rectify inaccurate personal data, request to erase personal data, and request the Council to restrict the processing of personal data.   To exercise such rights, you are to submit a written request to the Data Protection Officer via the contact e-mail address.  Any erasing and/or rectification of personal data and/or restriction of processing as referred to above may:   * 1. Render one or more cost items or the Entity ineligible for assistance under the Scheme or render void the Grant Agreement issued in favour of the Entity for assistance under the Scheme in relation to this written application for aid;   2. Lead the Council to enforce a recovery of aid granted to the Entity as part of this written application for aid. |
| E. | Sharing of data where strictly necessary and required by law:  For the purpose of processing this written application for aid in line with the National Regulation for the Call, the General Block Exemption Regulation or the *de minimis Regulation*, the Council may share the data provided via this application with other Government Entities and expert evaluators, subject that such processing satisfies at least one of the grounds listed under Regulation of the GDPR. The use of the Scarlet database owned by Jobs Plus shall also be used to aid in the interpretation of the ‘enterprise size declaration’, the ‘undertaking in difficulty’ and the ‘*de minimis* declaration’ forms. |
|  | For the purpose of monitoring of aid in line with Article 6 of the *de minimis* Regulation and Articles 11 and 12 of the General Block Exemption Regulation or where legally required, any data provided as part of this written application for aid may be shared with the European Commission. |
|  | For any individual aid awarded in excess of €500 000 (or for beneficiaries active in primary agricultural production, each individual aid award for such production exceeding €60 000 and for beneficiaries active in the fishery and aquaculture sector, each individual aid award exceeding €30 000) as part of this written application for aid, the details of the Beneficiary, the awarded aid, and the project details shall be published as provided for in Article 9 of the General Block Exemption Regulation. |
|  | If you feel that your data protection rights have been infringed, you have the right to lodge a complaint with the Information and Data Protection Commissioner. |
| I. | Authorisation to engage with the Council on matters related to this application.  I the undersigned, as the legal representative of the Applicant Entity, authorise the following Legal Bodies and/or Natural Persons to act on my behalf with the Council concerning matters related to this written application for aid and any subsequent documentation exchanged between the two parties concerning the same written application for aid.   |  |  |  | | --- | --- | --- | | **Name of Legal Entity** | **Name and Surname of Natural Person granted authorisation(1)** | **E-mail address of party granted authorisation(2)** | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  |   Note 1: Leave empty if authorisation is intended for any natural person engaged with the Legal Entity. Otherwise, specify the name and surname of the person(s) working for the Legal Entity to whom the authorisation is intended. Note 2: Written communication with the Legal Entity and/or Natural Person granted authorisation via email will only be accepted via the email address specified in the table above. |
| J. | |  |  | | --- | --- | | **Name and Surname of the person giving authorisation:** |  | | **E-mail address of the person giving authorisation:** |  | | **Signature of person giving authorisation:** |  | | **Designation:** |  | | **Date:** | Click here to enter a date. | | *The person giving authorisation should correspond to the data subject of personal data contained in this application as well as represent the Applicant Entity as its legal representative.* | | |  | | |

## Cumulation of Aid

The undersigned declares that aid approved under this incentive is in line with the terms and conditions set out in the National Rules for Participation and in line with Cumulation Article 8 of the Commission Regulation (EU) No 651/2014 of 17 June 2014 declaring certain categories of aid compatible with the internal market in application of Articles 107 and 108 of the Treaty.

## 4.3 Double Funding

The undersigned confirms that there has not been any approval or has been granted any public funding, financing or fiscal benefit in respect to the cost items included in this request for aid and will not seek funding or fiscal benefits for these cost items through other **National** and/or **European Union** measures. Such measures may include:

* Schemes administered by Malta Council for Science & Technology (MCST), Malta Enterprise, the Planning and Priorities’ Coordination Division (PPCD), the Measure and Support Division, the Tourism and Sustainable Development Unit (TSDU), JobsPlus, the Energy and Water Agency, and other government-funded schemes operated by other entities (such as JAMIE financial instrument).
* Schemes funded through the European Union’s Framework Programme (currently Horizon Europe), ERDF, ESF and any other European Union programmes/instruments.

## 4.4 Outstanding Recovery Order

The undersigned confirms that the applicant is not subject to an outstanding recovery order following a previous Commission decision declaring an aid illegal and incompatible with the internal market should be excluded from the scope of this Regulation.

## 4.5 Transparency Obligations

For any individual aid awarded in excess of EUR 500 000 (or for beneficiaries active in primary agricultural production, each individual aid award for such production exceeding EUR 60 000 and for beneficiaries active in the fishery and aquaculture sector, each individual aid award exceeding EUR 30 000), the details of the beneficiary; the aid awarded; and the project details; shall be published as provided for in Article 9 of the COMMISSION REGULATION (EU) No 651/2014 of 17 June 2014 declaring certain categories of aid compatible with the internal market in application of Articles 107 and 108 of the Treaty, as amended

By submitting this application, I hereby acknowledge that the Council shall abide by any applicable transparency rules and may publish and make available to third parties’ information as required by such rules.

## Additional declarations

|  |  |
| --- | --- |
| **For Malta-based Lead Applicant:** | |
| **I confirm that:**  **The information given in this form is accurate to the best of my knowledge. I understand that if it is later established that the information is misrepresented, the application or funded project may be ineligible or terminated respectively.** | **I agree** |
| **I have read and I accept the terms and conditions stipulated within the declarations above and the National Rules for Participation and confirm that I agree with the eventual publication of personal data and project proposal content information of successful applicants, including the name of the entity, project contacts, title of proposal and abstract.** | **I agree** |
| **I have never been found guilty by any competent Court in Malta or elsewhere of any crime[[4]](#footnote-4) and that I have never been adjudged bankrupt or insolvent by, or filed an application for insolvency before, any competent Court in Malta or elsewhere.** | **I agree** |
| **I have never been disqualified[[5]](#footnote-5) or excluded from participation in any Public Tender either by the Government of Malta or by the European Union or by any public entity in Malta.** | **I agree** |
| **I have never been disqualified[[6]](#footnote-6) or excluded from participation in any Public and/or European Union funding scheme.** | **I agree** |
| **Name of Legal Representative:** |  |
| **Position in Entity:** |
| **Contact Details:** |
| **Signature of Legal Representative + Entity Stamp:** | **Date** |

|  |  |
| --- | --- |
| **For other Malta-based partners (if applicable):** | |
| **I confirm that:**  **The information given in this form is accurate to the best of my knowledge. I understand that if it is later established that the information is misrepresented, the application or funded project may be ineligible or terminated respectively.** | **I agree** |
| **I have read and I accept the terms and conditions stipulated within the declarations above and the National Rules for Participation and confirm that I agree with the eventual publication of personal data and project proposal content information of successful applicants, including the name of the entity, project contacts, title of proposal and abstract.** | **I agree** |
| **I have never been found guilty by any competent Court in Malta or elsewhere of any crime[[7]](#footnote-7) and that I have never been adjudged bankrupt or insolvent by, or filed an application for insolvency before, any competent Court in Malta or elsewhere.** | **I agree** |
| **I have never been disqualified[[8]](#footnote-8) or excluded from participation in any Public Tender either by the Government of Malta or by the European Union or by any public entity in Malta.** | **I agree** |
| **I have never been disqualified[[9]](#footnote-9) or excluded from participation in any Public and/or European Union funding scheme.** | **I agree** |
| **Name of Legal Representative:** |  |
| **Position in Entity:** |
| **Contact Details:** |
| **Signature of Legal Representative + Entity Stamp:** | **Date** |

|  |  |
| --- | --- |
| **For other Malta-based partners (if applicable):** | |
| **I confirm that:**  **The information given in this form is accurate to the best of my knowledge. I understand that if it is later established that the information is misrepresented, the application or funded project may be ineligible or terminated respectively.** | **I agree** |
| **I have read and I accept the terms and conditions stipulated within the declarations above and the National Rules for Participation and confirm that I agree with the eventual publication of personal data and project proposal content information of successful applicants, including the name of the entity, project contacts, title of proposal and abstract.** | **I agree** |
| **I have never been found guilty by any competent Court in Malta or elsewhere of any crime[[10]](#footnote-10) and that I have never been adjudged bankrupt or insolvent by, or filed an application for insolvency before, any competent Court in Malta or elsewhere.** | **I agree** |
| **I have never been disqualified[[11]](#footnote-11) or excluded from participation in any Public Tender either by the Government of Malta or by the European Union or by any public entity in Malta.** | **I agree** |
| **I have never been disqualified[[12]](#footnote-12) or excluded from participation in any Public and/or European Union funding scheme.** | **I agree** |
| **Name of Legal Representative:** |  |
| **Position in Entity:** |
| **Contact Details:** |
| **Signature of Legal Representative + Entity Stamp:** | **Date** |

## 5. Check List

Please ensure that the relevant annexes listed below are submitted with this application form.

The application form in MS Word (.docx) format and a signed scanned copy (to be sent by email). **Compulsory.**

**Appendix I Consortium Agreement** signed by all (Malta based and China) Principal Investigators and any other partners. **Compulsory.**

**Appendix II:** Intellectual Property (IP) AGREEMENT signed by all (Malta and China) Principal Investigators and any other partners. **Compulsory.**

**As applicable (depending on the funding modality foreseen)**

**Annex I** *de Minimis* Declaration Form (for applications under Regulation A – *de minimis*)

**Annex II** Undertaking in Difficulty Form (for applications under Regulation B – GBER)

**Annex III** Signed Declaration where State Aid is not applicable for Public Entities whose activity does not constitute an economic activity within the meaning of Article 107 TFEU (Excluding Public Research and Dissemination Organisations)

**Annex IV** Signed declaration where State Aid is not applicable for Public Research and Knowledge Dissemination Organisations that do not carry out an economic activity within the meaning of Article 107 TFEU.

**APPENDIX 1**

**AGREEMENT signed by all (Malta and China) Principal Investigators and any other partners.**

**Compulsory**

**APPENDIX 2:**

**INTELLECTUAL PROPERTY (IP) AGREEMENT signed by all (Malta and China) Principal Investigators and any other partners.**

**Compulsory**

1. Please list all the partners taking part in the project. Also include those that are not requesting funding, if any. [↑](#footnote-ref-1)
2. Please indicate the currency. [↑](#footnote-ref-2)
3. Requested Cost = Project Cost x Funding Rate. [↑](#footnote-ref-3)
4. *This Declaration does not extend to any traffic related offences where these have been made.* [↑](#footnote-ref-4)
5. *This Declaration does not extend to disqualification of any tender proposal due to technical reasons.* [↑](#footnote-ref-5)
6. *This Declaration does not extend to disqualification of any tender proposal due to technical reasons.* [↑](#footnote-ref-6)
7. *This Declaration does not extend to any traffic related offences where these have been made.* [↑](#footnote-ref-7)
8. *This Declaration does not extend to disqualification of any tender proposal due to technical reasons.* [↑](#footnote-ref-8)
9. *This Declaration does not extend to disqualification of any tender proposal due to technical reasons.* [↑](#footnote-ref-9)
10. *This Declaration does not extend to any traffic related offences where these have been made.* [↑](#footnote-ref-10)
11. *This Declaration does not extend to disqualification of any tender proposal due to technical reasons.* [↑](#footnote-ref-11)
12. *This Declaration does not extend to disqualification of any tender proposal due to technical reasons.* [↑](#footnote-ref-12)